2002 UNIFORM BUSINESS REPORT (UBR)

Jan 29, 2002 8:00 am Secretary of State DOCUMENT # 624052 1. Entity Name BERNANDO GARCIA CORPORATION 01-29-2002 90007 010 ***150.00 Principal Place of Business Mailing Address 8215 SW 40TH ST. 8215 BIRD ROAD MIAMI FL 33155-3334 MIAMI FL 33126-5518 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 59-1912780 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARTIN, PEDRO A. Street Address (P.O. Box Number is Not Acceptable) 1221 BRICKELL AVE. % GREENBERG TRAURIG **MIAMI FL 33131** Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 4 Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) ☐ Addition TITLE TITLE ☐ Delete GARCIA, BERNANDO G. NAME NAME 8215 SW 40TH STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33155-3334 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition GARCIA, DOLORES M. NAME 8215 SW 40TH ST. STREET ADDRESS STREET ADDRESS MIAMI FL 33155-3334 CITY-ST-ZIP CITY-ST-ZIP Change TITLE VS Delete TITLE Addition NAME MARTIN, PETER R NAME STREET ADDRESS 8215 SW 40TH ST. STREET ADDRESS MIAMI FL 33155-3334 CITY-ST-ZIP CITY-ST-7IP VT ☐ Delete ☐ Change ☐ Addition TITLE HERNANDEZ, RAUL NAME NAME 8215 SW 40TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33155-3334 CITY-ST-ZIP Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIPA ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: <u>Laut L'Hérnandis U</u>

changed, or on an attachment with an address, with all other like empowered.

ATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/02

RAUL R HERMANDEZ

(305) 226-101

Daytime Phone #

FILED